DO/EO BIBLIOGRAPHIC DATA ENTRY

SERIAL NUMBER: 09	/ 890771	RECEIPT DATE:	08 / 0	16 /	01
IA NUMBER: PCT/ GB00	/ 00371	IA FILING DATE:	02 / 0	8 /	00
FAMILY NAME: FLUX		DELAY WAIVED (Y/N) :		Ν
GIVEN NAME: FETE	ROBERT	DEMAND RECEIVED (Y/N):		Υ
PRIORITY CLAIMED (Y/N)	# Y	PRIORITY DATE:	02 / 0	8 /	99
NO BASIC FEE (Y/N):	N	US DESIGNATED ONL	Y (Y/N):		M
ATTORNEY DOCKET NUMBER	: UDL0157PUSA	COUNTRY:			
CORRESPONDENCE NAME/ADI	DRESS: CUSTOMER NUMBE	R: 000000 TELEPH	ONE 248	3584	400
		FAX			

NAME: JAMES A KUSHMAN

STREET: BROOKS & KUSHMAN 22ND FLOOR

CITY: SOUTHFIELD

STATE/COUNTRY: MI ZIP: 48075

EMAIL:

APPLICATION TITLES: SAFETY LINE ANCHOR

TAB TO LAST POSITION, PUSH SEND